

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10733032
APPLICANT(S)

FILING DATE

CLAIMS						
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2	1					
3	1					
4	1					
5		4				
6		4				
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TOTAL IND.	4					
TOTAL DEP.	52					
TOTAL CLAIMS	60					

	IND	DEP	IND	DEP	IND	DEP
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